

STATE OF CALIFORNIA  
DEPARTMENT OF MANAGED HEALTHCARE  
HEALTHCARE SERVICE PLAN

1

## MONTHLY FINANCIAL REPORTING FORM




	1
1. FOR THE MONTH ENDING:	January 31, 2003
2. Name:	<b>UNIVERSALCARE</b>
3. File Number: (Enter last three digits) 933-0	<b>209</b>
4. Date Incorporated or Organized:	April 18, 1983
5. Date Licensed as a HCSP:	October 15, 1985
6. Date Federally Qualified as a HCSP:	
7. Date Commenced Operation:	November 1, 1985
8. Mailing Address:	1600 EAST HILL STREET, SIGNAL HILL, CA. 90806
9. Address of Main Administrative Office:	1600 EAST HILL STREET, SIGNAL HILL, CA. 90806
10. Telephone Number:	(562) 424-6200
11. HCSP's ID Number:	33-0012358
12. Principal Location of Books and Records:	1600 EAST HILL STREET, SIGNAL HILL, CA. 90806
13. Plan Contact Person and Phone Number:	KENNETH L. WATKINS (562) 981-4059
14. Financial Reporting Contact Person and Phone Number:	KENNETH L. WATKINS (562) 981-4059
15. President:*	HOWARD E. DAVIS
16. Secretary:*	JEFFREY V. DAVIS
17. Chief Financial Officer:*	KENNETH L. WATKINS
18. Other Officers:*	JAY B. DAVIS, EXECUTIVE VICE PRESIDENT
19.	
20.	
21.	
22. Directors:*	LAURA DAVIS, MARC DAVIS, ERIC SPENCER
23.	JOHN ADAMS, STEPHEN BASS, MARIA FLATT
24.	LORRIE HOLT, LOUIS MACDONALD, CHRISS CARREON
25.	STUART GRAY, DR. FRIEDMAN, DANSUN
26.	
27.	
28.	
29.	
30.	
31.	

<p>The officers listed on lines 15 through 17 of the health care service plan noted on line 2, being duly sworn, each for himself or herself, deposes and says that they are the officers of the said health care service plan, and that, for the reporting period stated above, all of the herein assets were the absolute property of the said health care service plan, free and clear from any liens or claims thereon, except as hereinstated, and that these financial statements, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said health care service plan as of the reporting period stated above, and of its income and deductions therefrom for the period reported, according to the best of their information, knowledge and belief, respectively.</p>	
32. President	HOWARD E. DAVIS (please type for valid signature)
33. Secretary	JEFFREY V. DAVIS (please type for valid signature)
34. Chief Financial Officer	KENNETH L. WATKINS (please type for valid signature)
<p>*Show full name (initials not accepted) and indicate by sign (#) those officers and directors who did not occupy the indicated position in the previous statement.</p>	
35. If this is a revised filing, check here:	<input checked="" type="checkbox"/>
36. If all dollar amounts are reported in thousands (000), check here:	<input type="checkbox"/>
<div style="background-color: #e0f0ff; display: inline-block; padding: 2px 10px;">Check My Work.</div>	

**STATE OF CALIFORNIA  
DEPARTMENT OF MANAGED HEALTHCARE  
HEALTHCARE SERVICE PLAN**

**MONTHLY FINANCIAL REPORTING FORM**

**SUPPLEMENTAL INFORMATION**

		1
1.	Are footnoted disclosures attached with this filing?	YES 
2.	Is the attached reporting form filed on a consolidated or combined basis? If "Yes", the plan is required to file consolidating or combining schedules.	NO 
3.	Is the plan required to file additional information (i.e. parent/affiliate financial statements, claims reports, etc.) that is required by the Department?	NO 

## STATEMENT AS OF 1-31-2003 OF 933-0209 UNIVERSAL CARE

## REPORT #1----PART A: ASSETS

1	2
<b>CURRENT ASSETS:</b>	Current Period
1. Cash and Cash Equivalents	22,320,041
2. Short-Term Investments	322,248
3. Premiums Receivable-Net	21,732,392
4. Interest Receivable	1,384
5. Shared Risk Receivables-Net	
6. Other Health Care Receivables-Net	5,268,703
7. Prepaid Expenses	3,803,917
8. Secured Affiliate Receivables-Current	
9. Unsecured Affiliate Receivables-Current	
10. Aggregate Write-Ins for Current Assets	1,382,760
11. TOTAL CURRENT ASSETS (Items 1 to 10)	54,831,445
<b>OTHER ASSETS:</b>	
12. Restricted Assets	508,470
13. Long-Term Investments	
14. Intangible Assets and Goodwill-Net	4,534,858
15. Secured Affiliate Receivables-Long-Term	
16. Unsecured Affiliate Receivables-Past Due	
17. Aggregate Write-Ins for Other Assets	1,669,316
18. TOTAL OTHER ASSETS (Items 12 to 18)	6,712,644
<b>PROPERTY AND EQUIPMENT</b>	
19. Land, Building and Improvements	16,058,162
20. Furniture and Equipment-Net	1,188,087
21. Computer Equipment-Net	2,391,456
22. Leasehold Improvements-Net	968,530
23. Construction in Progress	46,010
24. Software Development Costs	1,277,004
25. Aggregate Write-Ins for Other Equipment	0
26. TOTAL PROPERTY AND EQUIPMENT (Items 19 to 25)	21,929,249
27. TOTAL ASSETS	83,473,338
<b>DETAILS OF WRITE-INS AGGREGATED AT ITEM 10 FOR CURRENT ASSETS</b>	
1001. Inventory	1,382,760
1002.	
1003.	
1004.	
1098. Summary of remaining write-ins for Item 10 from overflow page	
1099. TOTALS (Items 1001 thru 1004 plus 1098)	1,382,760
<b>DETAILS OF WRITE-INS AGGREGATED AT ITEM 17 FOR OTHER ASSETS</b>	
1701. Deposit-L/T	433,059
1702. Others	58,104
1703. Deferred Taxes	1,178,153
1704.	
1798. Summary of remaining write-ins for Item 17 from overflow page	
1799. TOTALS (Items 1701 thru 1704 plus 1798)	1,669,316
<b>DETAILS OF WRITE-INS AGGREGATED AT ITEM 25 FOR OTHER EQUIPMENT</b>	
2501.	
2502.	
2503.	
2504.	
2598. Summary of remaining write-ins for Item 25 from overflow page	
2599. TOTALS (Items 2501 thru 2504 plus 2598)	0

## STATEMENTASOF1-31-2003OF933-0209UNIVERSALCARE

## REPORT#1----PARTB:LIABILITIESANDNETWORTH

1	2	3	4
<b>CURRENTLIABILITIES:</b>	CurrentPeriod		
	Contracting	Non-Contracting	Total
1. TradeAccountsPayable	7,094,410	XXX	7,094,410
2. CapitationPayable	5,039,466	XXX	5,039,466
3. ClaimsPayable(Reported)	7,598,645		7,598,645
4. IncurredButNotReportedClaims	25,472,381		25,472,381
5. POSClaimsPayable(Reported)			0
6. POSIncurredButNotReportedClaims	52,715		52,715
7. OtherMedicalLiability	5,847,915		5,847,915
8. UnearnedPremiums	8,253,432	XXX	8,253,432
9. LoansandNotesPayable	112,888	XXX	112,888
10. AmountsDueToAffiliates-Current		XXX	0
11. AggregateWrite-InsforCurrentLiabilities	0	0	0
12. TOTALCURRENTLIABILITIES(Items1to11)	59,471,852	0	59,471,852
<b>OTHERLIABILITIES:</b>			
13. LoansandNotesPayable(NotSubordinated)	4,482,123	XXX	4,482,123
14. LoansandNotesPayable(Subordinated)	7,539,517	XXX	7,539,517
15. AccruedSubordinatedInterestPayable		XXX	0
16. AmountsDueToAffiliates-LongTerm		XXX	0
17. AggregateWrite-InsforOtherLiabilities	1,600,000	XXX	1,600,000
18. TOTALOTHERLIABILITIES(Items13to18)	13,621,640	XXX	13,621,640
19. TOTALLIABILITIES	73,093,492	0	73,093,492
<b>NETWORTH</b>			
20. CommonStock	XXX	XXX	26,000
21. PreferredStock	XXX	XXX	
22. PaidInSurplus	XXX	XXX	39,400
23. ContributedCapital	XXX	XXX	
24. RetainedEarnings(Deficit)/FundBalance	XXX	XXX	10,222,147
25. AggregateWrite-InsforOtherNetWorthItems	XXX	XXX	92,299
26. TOTALNETWORTH(Items20to25)	XXX	XXX	10,379,846
27. TOTALLIABILITIESANDNETWORTH	XXX	XXX	83,473,338
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM11FORCURRENTLIABILITIES</b>			
1101.			0
1102.			0
1103.			0
1104.			0
1198. Summaryofremainingwrite-insforItem11fromoverflowpage			0
1199. TOTALS(Items1101thru1104plus1198)	0	0	0
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM17FOROTHERLIABILITIES</b>			
1701. MalpracticeInsuranceandotherliabilities	1,600,000	XXX	1,600,000
1702.		XXX	0
1703.		XXX	0
1704.		XXX	0
1798. Summaryofremainingwrite-insforItem17fromoverflowpage		XXX	0
1799. TOTALS(Items1701thru1704plus1798)	1,600,000	XXX	1,600,000
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM25FOROTHERNETWORTHITEMS</b>			
2501. MarketableSecurities	XXX	XXX	147,087
2502. UnrealizedLossonMarketableSecurities	XXX	XXX	-92,899
2503. OtherComprehensiveIncome	XXX	XXX	38,111
2504.	XXX	XXX	
2598. Summaryofremainingwrite-insforItem25fromoverflowpage	XXX	XXX	
2599. TOTALS(Items2501thru2504plus2598)	XXX	XXX	92,299

## STATEMENTASOF1-31-2003OF933-0209UNIVERSALCARE

## REPORT#2:REVENUE,EXPENSESANDNETWORTH

	1	2
	CurrentPeriod	Year-To-Date
<b>REVENUES:</b>		
1. Premiums(Commercial)	18,216,915	143,477,634
2. Capitation	270,251	1,871,610
3. Co-payments, COB, Subrogation	317,176	1,331,969
4. TitleXVIII-Medicare	654,891	2,403,531
5. TitleXIX-Medicaid	16,001,660	114,023,978
6. Fee-For-Service	396,740	3,491,498
7. Point-Of-Service(POS)		
8. Interest	33,880	306,148
9. RiskPoolRevenue		
10. AggregateWrite-InsforOtherRevenues	9,935	66,341
11. TOTALREVENUE(Items1to10)	35,901,448	266,972,709
<b>EXPENSES:</b>		
<b>MedicalandHospital</b>		
12. InpatientServices-Capitated	1,553,613	12,397,993
13. InpatientServices-PerDiem	10,778,974	81,485,904
14. InpatientServices-Fee-For-Service/CaseRate	1,043,698	5,560,696
15. PrimaryProfessionalServices-Capitated	9,493,139	72,218,669
16. PrimaryProfessionalServices-Non-Capitated	1,143,906	8,479,694
17. OtherMedicalProfessionalServices-Capitated		
18. OtherMedicalProfessionalServices-Non-Capitated	3,471,232	24,401,425
19. Non-ContractedEmergencyRoomandOut-of-AreaExpense,notincludingPOS	651,699	3,227,168
20. POSOut-Of-NetworkExpense		
21. PharmacyExpense-Capitated	717,377	4,526,548
22. PharmacyExpense-Fee-for-Service	2,777,798	26,077,768
23. AggregateWrite-InsforOtherMedicalandHospitalExpenses	237,916	2,024,636
24. TOTALMEDICALANDHOSPITAL(Items12to23)	31,869,352	240,400,501
<b>Administration</b>		
25. Compensation	1,293,404	6,869,535
26. InterestExpense	13,584	94,549
27. Occupancy, DepreciationandAmortization	1,236,383	7,628,019
28. ManagementFees		
29. Marketing	1,080,680	7,712,532
30. AffiliateAdministrationServices		
31. AggregateWrite-InsforOtherAdministration	0	0
32. TOTALADMINISTRATION(Items25to31)	3,624,051	22,304,635
33. TOTALEXPENSES	35,493,403	262,705,136
34. INCOME(LOSS)	408,045	4,267,573
35. ExtraordinaryItem		
36. ProvisionforTaxes	167,186	1,100,053
37. NETINCOME(LOSS)	240,859	3,167,520
<b>NETWORTH:</b>		
38. NetWorthBeginningofPeriod	10,138,987	7,212,326
39. AuditAdjustments		
40. Increase(Decrease)inCommonStock		
41. Increase(Decrease)inPreferredStock		
42. Increase(Decrease)inPaidinSurplus		0
43. Increase(Decrease)inContributedCapital		
44. Increase(Decrease)inRetainedEarnings:		
45. NetIncome(Loss)	240,859	3,167,520
46. DividendstoStockholders		
47. AggregateWrite-InsforChangesinRetainedEarnings	0	0
48. AggregateWrite-InsforChangesinOtherNetWorthItems	0	0
49. NETWORTHENDOFPERIOD(Items38to48)	10,379,846	10,379,846

## STATEMENTASOF1-31-2003OF933-0209UNIVERSALCARE

## REPORT#2:REVENUE,EXPENSESANDNETWORTH

1	2	3
	CurrentPeriod	Year-to-Date
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM10FOROTHERREVENUES</b>		
1001. OtherIncome	9,935	66,341
1002.		
1003.		
1004.		
1005.		
1006.		
1098. Summaryofremainingwrite-insforItem10fromoverflowpage		
1099. TOTALS(Items1001thru1006plus1098)	9,935	66,341
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM23FOROTHERMEDICALANDHOSPITALEXPENSES</b>		
2301. Reinsurance	144,780	1,242,487
2302. Lab&X-Ray	85,731	727,625
2303. Radiology	7,405	54,524
2304.		
2305.		
2306.		
2398. Summaryofremainingwrite-insforItem23fromoverflowpage		
2399. TOTALS(Items2301thru2306plus2398)	237,916	2,024,636
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM31FOROTHERADMINISTRATIVEEXPENSES</b>		
3101.		
3102.		
3103.		
3104.		
3105.		
3106.		
3198. Summaryofremainingwrite-insforItem31fromoverflowpage		
3199. TOTALS(Items3101thru3106plus3198)	0	0
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM47FORCHANGESINRETAINEDEARNINGS</b>		
4701.		
4702.		
4703.		
4704.		
4705.		
4706.		
4798. Summaryofremainingwrite-insforItem47fromoverflowpage		
4799. TOTALS(Items4701thru4706plus4798)	0	0
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM48FORCHANGESOFOTHERNETWORTHITEMS</b>		
4801.		
4802.		
4803.		
4804.		
4805.		
4806.		
4898. Summaryofremainingwrite-insforItem48fromoverflowpage		
4899. TOTALS(Items4801thru4806plus4898)	0	0

## REPORT#3:STATEMENTOFCASHFLOWS(DirectMethod)

1	2	3
	CurrentPeriod	Year-to-Date
<b>CASHFLOWPROVIDEDBYOPERATINGACTIVITIES</b>		
1. Group/IndividualPremiums/Capitation	20,409,507	154,233,429
2. Fee-For-Service	317,176	1,331,968
3. TitleXVIII-MedicarePremiums	654,891	2,403,532
4. TitleXIX-MedicaidPremiums	16,001,660	114,023,978
5. InvestmentandOtherRevenues	43,815	372,488
6. Co-Payments,COBAndSubrogation	396,740	3,491,498
7. MedicalandHospitalExpenses	-36,296,927	-245,081,134
8. AdministrationExpenses	-6,384,106	-24,344,779
9. FederalIncomeTaxesPaid	-167,186	-1,100,052
10. InterestPaid	-13,584	-94,549
11. NETCASHPROVIDEDBYOPERATINGACTIVITIES	-5,038,014	5,236,379
<b>CASHFLOWPROVIDEDBYINVESTINGACTIVITIES</b>		
12. ProceedsfromRestrictedCashandOtherAssets		-697
13. ProceedsfromInvestments		
14. ProceedsforSalesofProperty,PlantandEquipment		
15. PaymentsforRestrictedCashandOtherAssets		
16. PaymentsforInvestments		
17. PaymentsforProperty,PlantandEquipment	-342,416	-1,947,030
18. NETCASHPROVIDEDBYINVESTINGACTIVITIES	-342,416	-1,947,727
<b>CASHFLOWPROVIDEDBYFINANCINGACTIVITIES:</b>		
19. ProceedsfromPaidinCapitalorIssuanceofStock		
20. LoanProceedsfromNon-Affiliates		
21. LoanProceedsfromAffiliates		
22. PrincipalPaymentsonLoansfromNon-Affiliates		
23. PrincipalPaymentsonLoansfromAffiliates	-9,058	-815,261
24. DividendsPaid		
25. AggregateWrite-InsforCashProvidedbyFinancingActivities	0	0
26. NETCASHPROVIDEDBYFINANCINGACTIVITIES	-9,058	-815,261
27. NETINCREASE(DECREASE)INCASH(Items11,18&26)	-5,389,488	2,473,391
28. CASHANDCASHEQUIVALENTSATTHEBEGINNINGOFTHEMONTH	27,709,529	19,846,650
29. CASHANDCASHEQUIVALENTSATTHEENDOFTHEMONTH	22,320,041	22,320,041
<b>RECONCILIATIONOFNETINCOMETONETCASHPROVIDEDBYOPERATINGACTIVITIES:</b>		
30. NetIncome	240,859	3,167,520
<b>AdjustmentstoReconcileNetIncomeetoNetCashProvidedbyOperatingActivities</b>		
31. DepreciationandAmortization	216,191	1,462,707
32. Decrease(Increase)inReceivables	-67,929	6,103,282
33. Decrease(Increase)inPrepaidExpenses	-55,373	-1,595,005
34. Decrease(Increase)inAffiliateReceivables		
35. Increase(Decrease)inAccountsPayable	-2,934,458	-2,002,398
36. Increase(Decrease)inClaimsPayableandSharedRiskPool	-4,427,963	-5,289,226
37. Increase(Decrease)inUnearnedPremium	1,990,271	2,780,906
38. AggregateWrite-InsforAdjustmentstoNetIncome	388	608,593
39. TOTALADJUSTMENTS(Items31through38)	-5,278,873	2,068,859
40. NETCASHPROVIDEDBYOPERATINGACTIVITIES (Item30adjustedbyItem39mustagree toItem11)	-5,038,014	5,236,379
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM25FORCASHFLOWPROVIDEDBYFINANCINGACTIVITIES</b>		
2501.		
2502.		
2503.		
2598. Summaryofremainingwrite-insforItem25fromoverflowpage		
TOTALS(Items2501thru2503plus2598)	0	0
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM38FORADJUSTMENTSTONETINCOME</b>		
3801. Deposit-L/T		
3802. Others	388	608,593
3803.		
3898. Summaryofremainingwrite-insforItem38fromoverflowpage		
3899. TOTALS(Items3801thru3803plus3898)	388	608,593

## REPORT#3:STATEMENTOFCASHFLOWS(IndirectMethod)

	1	2
	CurrentPeriod	Year-to-Date
<b>CASHFLOWSFROMOPERATINGACTIVITIES:</b>		
1. NetIncome(Loss)	240,859	3,167,520
<b>ADJUSTMENTSTORECONCILENETINCOME(LOSS)TONETCASHPROVIDED(USED)</b>		
<b>BYOPERATINGACTIVITIES:</b>		
2. DepreciationandAmortization	216,191	1,462,707
3. UnrealizedGains/LossesonEquitySecurities		
4. Gain/LossonSaleofAssets		
5. DeferredIncomeTaxes		
<b>CHANGEINOPERATINGASSETSANDLIABILITIES</b>		
<b>(Increase)DecreaseinOperatingAssets:</b>		
6. Receivables	-67,929	6,103,282
7. PrepaidExpenses	-55,373	-1,595,005
8. AffiliateReceivables	0	0
9. Aggregatwrite-insfor(increase)decreaseinoperatingassets	388	8,593
<b>Increase(Decrease)inOperatingLiabilities:</b>		
10. TradeAccountsPayable	-3,234,804	-1,859,433
11. CapitationPayable	300,347	-142,964
12. ClaimsPayableandIBNR	-4,313,385	-5,628,316
13. OtherMedicalLiability	-114,579	339,089
14. UnearnedPremiums	1,990,271	2,780,906
15. AffiliatePayables		
16. Aggregatwrite-insforincrease(decrease)inoperatingliabilities	0	600,000
17. <b>NETCASHPROVIDED(USED)INOPERATINGACTIVITIES</b>	<b>-5,038,014</b>	<b>5,236,379</b>
<b>CASHFLOWFROMINVESTINGACTIVITIES</b>		
18. ProceedsfromRestrictedCashandOtherAssets	0	-697
19. ProceedsfromInvestments		
20. ProceedsforSalesofProperty,Plant,andEquipment		
21. PaymentsforRestrictedCashandOtherAssets		
22. PaymentsforInvestments		
23. PaymentsforProperty,Plant,andEquipment	-342,416	-1,947,030
24. Aggregatwrite-insforcashflowprovidedbyinvestingactivities	0	0
25. <b>NETCASHPROVIDED(USED)ININVESTINGACTIVITIES</b>	<b>-342,416</b>	<b>-1,947,727</b>
<b>CASHFLOWFROMFINANCINGACTIVITIES</b>		
26. ProceedsfromPaid-in-CapitalorIssuanceofStock		
27. LoanProceedsfromNon-Affiliates		
28. LoanProceedsfromAffiliates		
29. PrincipalPaymentsonLoansfromNon-Affiliates		
30. PrincipalPaymentsonLoansfromAffiliates	-9,058	-815,261
31. DividendsPaid		
32. PrincipalPaymentsunderleaseobligations		
33. Aggregatwrite-insforcashflowprovidedbyfinancingactivities	0	0
34. <b>NETCASHPROVIDED(USED)INFINANCINGACTIVITIES</b>	<b>-9,058</b>	<b>-815,261</b>
35. <b>NETINCREASE/(DECREASE)INCASHANDCASHEQUIVALENTS</b>	<b>-5,389,488</b>	<b>2,473,391</b>
36. <b>CASHANDCASHEQUIVALENTSATTHEBEGINNINGOFTHEMONTH</b>	<b>27,709,529</b>	<b>19,846,650</b>
37. <b>CASHANDCASHEQUIVALENTSATTHEENDOFTHEMONTH</b>	<b>22,320,041</b>	<b>22,320,041</b>



**REPORT#3:STATEMENTOFCASHFLOWS(IndirectMethod)**

1	2	3
	CurrentPeriod	Year-to-Date
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM9FOR(INCREASE)DECREASEINOPERATINGASSETS</b>		
901. Deposit-L/T		
902. Others	388	8,593
903.		
998. Summaryofremainingwrite-insforItem9fromoverflowpage		
999. TOTALS(Items901thru903plus998)	388	8,593
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM16FORINCREASE(DECREASE)INOPERATINGLIABILITIES</b>		
1601. Others	0	600,000
1602.		
1603.		
1698. Summaryofremainingwrite-insforItem16fromoverflowpage		
1699. TOTALS(Items1601thru1603plus1698)	0	600,000
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM24FORCASHFLOWPROVIDEDBYINVESTINGACTIVITIES</b>		
2401.		
2402.		
2403.		
2498. Summaryofremainingwrite-insforItem24fromoverflowpage		
2499. TOTALS(Items2401thru2403plus2498)	0	0
<b>DETAILSOFWRITE-INSAGGREGATEDATITEM33FORCASHFLOWPROVIDEDBYFINANCINGACTIVITIES</b>		
3301.		
3302.		
3303.		
3398. Summaryofremainingwrite-insforItem33fromoverflowpage		
3399. TOTALS(Items3301thru3303plus3398)	0	0

## REPORT#4:ENROLLMENTANDUTILIZATIONTABLE

## TOTAL ENROLLMENT

1 Source of Enrollment	2 Total Enrollees At End of Previous Period	3 Additions During Period	4 Terminations During Period	5 Total Enrollees at End of Period	6 Cumulative Enrollee Months for Period	Total Member Ambulatory Encounters for Period			10 Total Patient Days Incurred	11 Annualized Hospital Days/1000	12 Average Length of Stay
						7 Physicians	8 Non-Physicians	9 Total			
1. Group (Commercial)	128,085		19,606	108,479	900,376	1,604		1,604	2,054	27	5.295
2. Medicare Risk	469	419		888	3,600	54		54	126	420	378.38
3. Medi-Cal Risk	176,317		2,181	174,136	1,248,092	6,933		6,933	2,857	27	3.646
4. Individual	0			0	0			0			
5. Point of Service	1,249		118	1,131	9,378	61		61		0	
6. Aggregate write-ins for Other	33,819	347	63	34,103	229,056	571	0	571	160	8	
7. Total Membership	339,939	766	21,968	318,737	2,390,502	9,223	0	9,223	5,197	26	
DETAILS OF WRITE-INS AGGREGATED AT ITEM 6 FOR OTHER SOURCES OF ENROLLMENT											
601. Healthy Family-LA	18,278		63	18,215	125,319	228		228	56	5	0
602. Healthy Family- Others	9,591	50		9,641	63,789	310		310	56	11	0
603. Plan to Plan	5,950	297		6,247	39,948	33		33	48	14	0
Summary of remaining write-ins for											
698. Item 6 from overflow page				0				0			
Totals (lines 601 through 603 plus 699, 698) (Line 6 above)	33,819	347	63	34,103	229,056	571	0	571	160	8	

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## STATEMENT AS OF 1-31-2003 OF 933-0209 UNIVERSAL CARE

**KNOX-KEENE**  
**SUPPLEMENTAL INFORMATION**  
**PURSUANT TO SECTIONS 1300.84.06 AND 1300.84.2**

		1	2
1.	Net Equity		\$ 10,379,846
2.	Add: Subordinated Debt		\$ 7,539,517
3.	Less: Receivables from officers, directors, and affiliates		\$
4.	Intangibles		\$ 4,534,858
5.	Tangible Net Equity (TNE)		\$ 13,384,505
6.	Required Tangible Net Equity (See Below)		\$ 9,723,337
7.	TNE Excess (Deficiency)		\$ 3,661,168
		Full Service Plans	Specialized Plan
A.	Minimum TNE Requirement	\$ 1,000,000	Minimum TNE Requirement \$ 50,000
B. REVENUES:			
8.	2% of the first \$150 million of annualized premium revenues	\$ 3,000,000	2% of the first \$7.5 million of annualized premium revenue \$
	Plus		Plus
9.	1% of annualized premium revenues in excess of \$150 million	\$ 2,717,246	1% of annualized premium revenue in excess of \$7.5 million \$
10.	Total	\$ 5,717,246	Total \$ 0
C. HEALTHCARE EXPENDITURES:			
11.	8% of the first \$150 million of annualized healthcare expenditures, except those paid on a capitated or managed hospital basis.	\$ 4,610,932	8% of the first \$7.5 million of annualized healthcare expenditures, except those paid on a capitated or managed hospital basis. \$
	Plus		Plus
12.	4% of annualized healthcare expenditures in excess of \$150 million except those paid on a capitated or managed hospital payment basis.	\$ 0	4% of annualized healthcare expenditures in excess of \$7.5 million except those paid on a capitated or managed hospital payment basis. \$
	Plus		Plus
13.	4% of the annualized hospital expenditures paid on a managed hospital payment basis.	\$ 5,112,405	4% of the annualized hospital expenditures paid on a managed hospital payment basis. \$
14.	Total	\$ 9,723,337	Total \$ 0
15.	Required "TNE" - Greater of "A" "B" or "C"	\$ 9,723,337	Required "TNE" - Greater of "A" "B" or "C" \$

**KNOX-KEENE  
SUPPLEMENTALINFORMATION  
PURSUANTTOSECTIONS1374.64**

**POINTOFSERVICE"ADJUSTED"TANGIBLENETEQUITYCALCULATION**

CalculationofTangibleNetEquityandrequiredTangibleNetEquityinaccordancewithSection1374.64:

		1
1. NetEquity	\$	10,379,846
2. Add:SubordinatedDebt	\$	7,539,517
3. Less:Receivablesfromofficers,directors,and affiliates	\$	
4. Intangibles	\$	4,534,858
5. TangibleNetEquity(TNE)	\$	13,384,505
6. RequiredTangibleNetEquity(FromLine18below)	\$	9,775,341
7. TNEExcess(Deficiency)	\$	3,609,164
ADJUSTEDREQUIREDMINIMUMTANGIBLENETEQUITYCALCULATION:		
<b>I. PlanisrequiredtohaveandmaintainTNEasrequiredbyRule1300.76(a)(1)or(2):</b>		
8. MinimumTNEascalculatedunderRule1300.76(a)(1)or(2)	\$	9,723,337
9. 10%ofannualizedhealthcareexpendituresforout-of-network serviceforpoint-of-serviceenrollees	\$	52,004
10. Addlines8and9	\$	9,775,341
<b>II. PlanisrequiredtohaveandmaintainTNEasrequiredbyRule1300.76(a)(3):</b>		
<b><u>PARTA</u></b>		
11. MinimumTNEascalculatedtoexcludeannualizedhealthcare expendituresforout-of-networkservicesforpoint-of-service enrollees(attachworksheetPage15)	\$	9,723,337
12. 10%ofannualizedhealthcareexpendituresforout-of-network servicesforpoint-of-serviceenrollees	\$	52,004
13. Addlines11and12	\$	9,775,341

## STATEMENT AS OF 1-31-2003 OF 933-0209 UNIVERSAL CARE

## WORKSHEET FOR ADJUSTED TANGIBLE NET EQUITY CALCULATION

	1 Full Service Plans	2 Specialized Plans
1. Healthcare expenditures for period	\$ 0	\$
Less:		
2. Capitated or managed hospital payment basis expenditures	0	
3. Healthcare expenditures for out-of-network services for point-of-service enrollees	0	
4. Result	0	0
5. Annualized	0	
6. Reduce to maximum of \$150 million	0	
7. Multiply by 8%	\$ 0	\$ 0
Plus		
8. Annualized healthcare expenditures except those paid on a capitated or managed hospital payment basis and excluding healthcare expenditures for out-of-network services for point-of-service enrollees	\$ 0	\$
9. Line 8 less \$150 million	0	
10. Multiply by 4%	\$ 0	\$ 0
Plus		
11. Annualized hospital expenditures paid on a managed hospital payment basis and excluding healthcare expenditures for out-of-network services for point-of-service enrollees	\$ 0	\$
12. Multiply by 4%	\$ 0	\$ 0
13. Total	\$ 0	\$ 0

**STATEMENTASOF1-31-2003OF933-0209UNIVERSALCARE**



**STATEMENTASOF1-31-2003OF933-0209UNIVERSALCARE**

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